	`**( 	Washir	ngton, D.C. 20	231	• ,	7/	
7	560 4	130/99	756	.0	•	4/3019	12
MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.				Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.  Certificate of Mailing			
CURRENT CORRESPONDENCE ADDRESS	(Note: Legibly mark-up with any MINISTRATOR		40426 P R	the United Stat	es Postal Service lope addressed to	with sufficient po	eing deposited with stage for first class e address above on
TESTA HURI HIGH STREE 125 HIGH S BOSTON MA	STREET	D NUC	S. S	Ca	errie Lill	ey MUU 199	(Depositor's name) (Date)
APPLICATION NO.	FILING DATE	TOTAL CLAIMS	DEM	EXAMINER ANI	D GROUP ART U	VIT	DATE MAILED
08/657,750	05/30/96	038	DAVIS	JR, W		2783	04/26/9
Applicant MADNICK		35 L	JSC 154 (	b) term	ext. =	0 Day	/S.
TLEOF NVENTION QUERYING HE CONTEXT IN	ETEROGENEOUS FERCHANGE	DATA SOURC	ES DIST	RIBUTED	OVER A I	NETWORK	USING
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL EN	TITY FEE	DUE	DATE DUE
2 MIT-058	707-00	04.000 S2	25 UTI	LITY	YES \$6	505.00	07/26/99
Use of PTO form(s) and Customer Number are recommended, but not required.  (1) the name attorneys or the name of member a nand the name.				on the patent front page, list of up to 3 registered patent gents OR, alternatively, (2) a single firm (having as a gistered attorney or agent) of up to 2 registered patent ents. If no name is listed, no rinted.  1 Testa, Hurwitz&Thibeaul 2 2			
3. ASSIGNEE NAME AND RESIDENCE PLE ASE NOTE: Unless an assigne Indusion of assignee data is only a the PTO or is being submitted unde filipe an assignment. (A) NAME OF ASSIGNEE	e is identified below, no ass ppropiate when an assignme	ignee data will appear o ent has been previously	on the patent.  y submitted to a substitue for	of Patents and Substitute Issue Fee Advance Or	Trademarks): der - # of Copies_	10	able to Commissioner
(B) RESIDENCE: (CITY & STATE C Please check the appropriate assig		· <u>·</u>		DEPOSIT ACC (ENCLOSE AN	COUNT NUMBER EXPLESS  DECLIFICATION  DECLIFICATION		uld be charged to:
THE COMMISSIONER OF PATENTS	AND TRADEMARKS IS requ	ested to apply the Issu	e Fee to the appl	lication identified a	bove. JUN A	2 1000	
NOTE: The Issue Fee will not be accer or agent; or the assignee or other part Trademark Office.					Publishin	<del>3 1999</del> <b>9</b> Division	
Burden Hour Statement: This form depending on the needs of the indiv to complete this form should be se Office, Washington, D.C. 20231. D ADDRESS. SEND FEES AND TH Paterits, Washington D.C. 20231	ridual case. Any comment on to the Chief Information O NOT SEND FEES OR ( IS FORM TO: Box Issue I	s on the amount of ting of the control of the contr	ne required Trademark S TO THIS issioner for	96/82/1779 91 FE1842 92 FE1861	CONTRACT GOOD	60	0 5.00 (P 0.00 (P
Under the Paperwork Reduction Ac of information unless it displays a v		•					

PART B-ISSUE FEE TRANSMITTAL

**Box ISSUE FEE** 

Complete and mall this form, together with applie fees, to: